

FRANKLIN COUNTY  
ZONING MAP AMENDMENT APPLICATION

(Type or Print)

I/We, Willard Investment Properties, LLC, as Owner(s), Contract Purchasers, or Owner's Authorized Agent of the property described below, hereby apply to the Franklin County Board of Supervisors for a zoning map amendment on the property as described below:

Petitioner's Name: Ron Willard II

Petitioner's Address: P.O. Box 540 Wirtz, VA 24184

Petitioner's Phone Number: 540 721-5288 540 537-1915

Petitioner's E-mail: Ron@thewillardcompanies.com

Property Owner's Name: Willard Investment Properties, LLC

Property Owner's Address: P.O. Box 540 Wirtz, VA 24184

Property Owner's Phone Number: 540 721-5288

Property Owner's E-mail: Ron@thewillardcompanies.com

Physical Address of the Property Bridgewater Granite Drive near Halesford Bridge

Directions to Property from Rocky Mount: 40 east, 122 to Halesford Bridge on left

4. Tax Map and Parcel Number: 0150005601, 5602, 5603, 5604, 0150005711

5. Magisterial District: Falls Creek

6. Property Information:

A. Size of Property:

30.324 acres

B. Existing Zoning:

PC1

C. Existing Land Use:

Vacant

D. Is property located within any of the following overlay zoning districts:

Corridor District Westlake Overlay District  Smith Mountain Lake Surface District

E. Is any land submerged under water or part of a lake? Yes  No  If yes, explain.

7. Proposed Zoning Map Amendment Information:

A. Proposed Land Use: Residential community, with one commercial lot

B. Size of Proposed Use: \_\_\_\_\_

C. Other Details of Proposed Use: Petitioner requests to remove existing proffered concept plan and submit new concept plan for residential community. The PCD zoning classification will remain the same.

Checklist for completed items:

Application Form

Letter of Application

Concept Plan

Application Fee

\*\*I certify that this application for a zoning map amendment and the information submitted herein is correct and accurate. I authorize County staff to access this property for purposes related to the review and processing of this application.

Petitioner's Name (Print): Ronald L. Willard, Jr.

Signature of Petitioner: Ron L. Willard

Date: 4-4-22

Mailing Address: P.O. Box 540

Wirtz, VA 24184

Telephone: 540 721-5288 540 537-1915

Email Address: Ron@the willard companies.com

Owner's consent, if petitioner is not property owner:

Owner's Name (Print): \_\_\_\_\_

Signature of Owner: \_\_\_\_\_

Date: \_\_\_\_\_